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BIBDATASHEET

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APPLICANTS									
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** FOREIGN APPLICATIONS ************************************									
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/20/2003									
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met Verified and Acknowledged	R	Allowance	tials	COUNTRY WI		WING	CLAII 35		CLAIMS 5
ADDRESS 23524 FOLEY & LARDNER 150 EAST GILMAN STREET P.O. BOX 1497 MADISON, WI 53701-1497									
TITLE Milking and clear	ning te	eat cup, system, and m	ethod						
FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT No for following: RECEIVED All Fees 1.16 Fees 1.17 Fees time) 1.18 Fees						6 Fees (7 Fees (Proc	essing Ext. of	

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